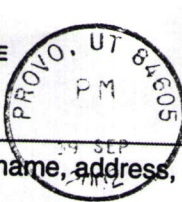


UNITED STATES POSTAL SERVICE


 First-Class Mail  
 Postage & Fees Paid  
 USPS  
 Permit No. G-10

 • Print your name, address, and ZIP Code in this box •  
**RECEIVED**

SEP 23 2002

 DIVISION OF  
 OIL, GAS AND MINING


State of Utah

 Department of Natural Resources  
 Division of Oil, Gas and Mining  
 1594 West North Temple Suite 1210  
 Salt Lake City, UT 84114-5801

*bell*

Is your RETURN ADDRESS completed on the reverse side?

SENDER: JB DOGM M/015/061 &amp; M/041/012 9/17/02

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address  
 2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

 LUANA CRANE  
 UTAH INDEPENDENT BANK  
 PO BOX 09  
 SALINA UT 84654

4a. Article Number

7099 3400 0016 8895 4920

4b. Service Type

- ☐ Registered ☒ Certified  
☐ Express Mail ☐ Insured  
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

9/19/02

5. Received By: (Print Name)

M. L. &amp; Shan

6. Signature: (Addressee or Agent)

*Xc [Signature]*

8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.

PS Form 3811, December 1994

102595-97-B-0179

Domestic Return Receipt

U.S. Postal Service

**CERTIFIED MAIL RECEIPT**

(Domestic Mail Only; No Insurance Coverage Provided)

JB DOGM M/015/061 &amp; M/041/012 9/17/02

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

 Postmark  
 Here

Recipient's Name (Please Print Clearly) (to be completed by mailer)

LUANA CRANE - UTAH INDEPENDENT BANK

Street, Apt. No.; or PO Box No.

PO BOX 09

City, State, ZIP+4

SALINA UT 84654

PS Form 3800, February 2000

See Reverse for Instructions

7099 3400 0016 8895 4920